SCC eFile	COMMONWEALTH OF V	2014 ANNUAL REPORT 214503346 DIMMONWEALTH OF VIRGINIA TE CORPORATION COMMISSION			
1.) CORPORATION NAME:			DUE DATE: 1	/31/2014	
SeniorNavigator.com					
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: DONALD DLECKY WESTMINSTER CANTERBURY			SCC ID NO: 05323308		
			5.) STOCK INFORMATION		
1600 WESTBROOK AVE.			CLASS	AUTHORIZED	
RICHMOND, VA					
3.) CITY OR COUNTY OF VA REG RICHMOND CITY	ISTERED OFFICE:				
4.) STATE OR COUNTRY OF INCO VA	DRPORATION:				
6.) PRINCIPAL OFFICE ADDRESS:					
ADDRESS: 7501 BO BOULD	DULDERS VIEW DR ERS IV, SUITE 201				
CITY/ST/ZIP: RICHI	MOND, VA 23225				
7.) DIRECTORS AND PRINCIPAL (l officers must be oth a director and	listed. An individual an officer.	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DONALD D LECKY TREASURER WESTMINSTER CANTERBURY 1600 WESTBROOK AVE. RICHMOND, VA 23227	X OFFIC	CER	X DIRECTOR	
		χ OFFIC	CER	χ DIRECTOR	
NAME: TITLE:	JOHN H HAGER				
ADDRESS:	CHAIRMAN 4600 SULGRAVE ROAD				
CITY/ST/ZIP/CO:	RICHMOND, VA 23221				
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DEBORAH D OSWALT VICE CHAIR 707 E MAIN ST RICHMOND, VA 23219	X OFFIC	CER	X DIRECTOR	
		X OFFIC	CER	χ DIRECTOR	
NAME: TITLE:	JAMES C ROBERTS	<u> </u>			
ADDRESS:	CHAIR EMERITUS 1001 HAXALL POINT				
CITY/ST/ZIP/CO:	RICHMOND, VA 23219				
NAME		OFFIC	CER	X DIRECTOR	
NAME: TITLE:	JENNIFER AULGER DIRECTOR				
ADDRESS:	OFFICE OF THE GOVERNOR				
CITY/ST/ZIP/CO:	1111 E. BROAD STREET, 4TH F RICHMOND, VA 23219	LOOR			

		OFFICE	ER X	DIRECTOR		
NAME:	RICHARD GRIER					
TITLE: ADDRESS:	DIRECTOR THOMPSON & MCMU	III AN DC				
ADDRESS.	100 SHOCKOE SLIP	LLAN, PC				
CITY/ST/ZIP/0		9				
		OFFICE	ER X	DIRECTOR		
NAME:	VERDIA HAYWOOD					
TITLE: ADDRESS:	DIRECTOR 2701 VERILY COURT					
CITY/ST/ZIP/						
		OFFICE	ER X	DIRECTOR		
NAME:	ADAM HOFHEIMER					
TITLE:	DIRECTOR					
ADDRESS:	130 WESTMORELANI					
CITY/ST/ZIP/0	CO: RICHMOND, VA 2322			•		
NAME:	DIGUADO LINDOAY	OFFICE	ER X	DIRECTOR		
TITLE:	RICHARD LINDSAY DIRECTOR					
ADDRESS:	352 KEY WEST DRIVE	≣				
CITY/ST/ZIP/0	CO: CHARLOTTESVILLE,	VA 22911				
		OFFICE	ER X	DIRECTOR		
NAME:	KATIE ROEPER					
TITLE: ADDRESS:	DIRECTOR					
CITY/ST/ZIP/	1005 WEST AVENUE CO: RICHMOND, VA 23220	n				
		OFFICE	ER X	DIRECTOR		
NAME:	TIM SENZ					
TITLE:	DIRECTOR					
ADDRESS:	10187 COOL WELL TE	-				
CITY/ST/ZIP/0	CO: MECHANICSVILLE, V					
NAME.		OFFICE	ER X	DIRECTOR		
NAME: TITLE:	KARLA SORENSEN DIRECTOR					
ADDRESS:	6603 MADISON MCLE	AN DRIVE				
CITY/ST/ZIP/0	CO: MCLEAN, VA 22101					
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.						
/s/ JOHN H HAGER	JOHN H HAGER,	CHAIRMAN	1/10/20	014		
SIGNATURE OF DIRECTOR LISTED IN THIS REP		AND CORPORATE LE	DATI	E		
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing						

respect with the intent that the document be delivered to the Commission for filing.